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CLAIMS ONLY							Application Number 10/628890		Filing Date	
							Applicant(s)			
03-17-05							* May be used for additional claims or amendments			
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT					
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1			/				51			
2				/			52			
3				/			53			
4				/			54			
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6				/			56			
7				/			57			
8				/			58			
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44				/			94			
45				/			95			
46				/			96			
47				/			97			
48				/			98			
49				/			99			
50				/			100			
Total Indep			1				Total Indep			
Total Depend			25				Total Depend			
Total Claims			26				Total Claims			